

Q 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT
for the

ANDREW J. SMITH

Plaintiff(s)

v.

GINA RAIMONDO

Defendant(s)

Civil Action No. 1:19-cv-00029-JJM-LDA

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

GINA RAIMONDO 150 SOUTH MAIN ST.
82 SMITH STREET
PROVIDENCE, RI 02903

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

ANDREW J. SMITH ID#152162
MEDIUM SECURITY BR-5B
P.O. BOX 8274
CRASTON, RI 02920

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

2/25/19

CLERK OF COURT

Carmen C. Patta
Signature of Clerk or Deputy Clerk

Civil Action No. 1:19-cv-00029-JJM-LDA

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (name of individual and title, if any) GINA RAIMONDO, RI GOVERNOR
 was received by me on (date) X

☒ I personally served the summons on the individual at (place) CARE OF: GINA RAIMONDO'S ATTORNEY,
RIAG LOCATED AT 150 SOUTH MAIN STREET PROVIDENCE, RI 02903 on (date) X; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☒ I served the summons on (name of individual) Brenda Baum, who is
 designated by law to accept service of process on behalf of (name of organization) _____
Gov. Gina Raimondo on (date) 2/25/19; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ 0 for travel and \$ 0 for services, for a total of \$ 0.00

I declare under penalty of perjury that this information is true.

Date: X

Xmaria Melaly
 Server's signature

X Marcia McCabe
 Printed name and title

X P.O. Box 20301, Cranston, RI 02920
 Server's address

Additional information regarding attempted service, etc:

2/25/19 accepting service on behalf
 of Gov. Gina Raimondo in her Official
 Capacity as Gov. for the State of Rhode Island.
 BDBr, AAG
 BRENDA D. BAUM